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Pedology.

SUMMER BOWEL DISORDERS.

By F. H. ORME, M. D., Atlanta, Ga.

EX-PRESIDENT AMERICAN INSTITUTE OF HOMEOPATHY.

Suggestions upon the treatment of cholera infantum, cholera morbus, summer diarrhea and allied affections of children, to be given "briefly, by return mail," as requested, must necessarily be partial and imperfect.

Between the more severe and milder forms there is, at least in some cases, only a difference in degree, not in etiology, and each case must of course be treated upon its individual merits, and according to the changing conditions. Having long been convinced that many of the disturbances of the alimentary system in children are due—at least many of the sudden and severe cases—to some not-easily-understood impression upon the cerebro-spinal system, treatment has been devised accordingly, with no reason to regret this course.

Attention to environment is the first thing to be considered. To attempt to cure a severe case in a close, hot and filthy room with disagreeable surroundings is futile. Pure air—out of doors preferred—day and night is the first requisite. The refreshment of a tepid (not hot) bath, or of sponging the extremities, when dry and hot, and a cold cloth on the head when there is high fever, is extremely important. Crushed ice, which is often taken with great avidity, is life-giving in some cases, and need never be denied, although it should be given with caution when the stomach is intolerant of even a teaspoonful of water. Each dose of medicine should be accompanied with a little ice when there is craving for it.

The changes of diet so often made without reason, should not be encouraged. The change resides within the child, and the trouble is not with the food when that has been proved to be pure and suitable. Bad cases of sickness are rarely produced by errors in diet alone, although slight ones often are. There are usually other factors. Healthy children, at the breasts of healthy mothers, or taking condensed milk or other good food upon which they have been thriving are often, from some obscure cause, brought to death's door in an hour, and abundant experience has shown that with proper care and treatment they have recovered without change of food, although abstinence for a time is certainly essential. Ice or iced water is often better than the milk, which is taken on account of thirst only to be of detriment rather than advantage to the patient. Thousands of children have been sacrificed to the eagerness of the mother to feed at an improper time "because it is so weak." Here the skillful direction of the physician must come in, as in many other things.

The most of the acute cases call for *Aconite*, at least as one remedy. *Belladonna* is indicated by the erethism and tendency to cerebral trouble, and, properly used, will do more than any one remedy known to me to overcome the disturbance of the nervous equilibrium.

Next to these *Mercurius vivus* or *Mercurius corr.*, are most frequently called for, and may have to be continued during many days.

In the more simple catarrhal cases, *Cina* answers well, and in older children, with verminous complications, or where "worm symptoms" are simulated, *Santonine* in vermifuge doses will sometimes work wonders. If with teething children the gums become irritable and swollen, lancing is often promptly helpful.

In the secondary or sub-acute condition, when diarrhea or lientery continue, from a weakened state, a little whisky toddy has been found extremely serviceable, and *Ferrum met.* has often helped the anæmic condition which is usually found in protracted cases.

The utility of change of air from city to country, or from warmer to cooler, is everywhere recognized as of the utmost importance. By change there is often an escape from some unseen and unsuspected cause of the disease. In cases that refuse to improve when the best care and treatment have been furnished, such change is imperative.

Of the scores of remedies used in these cases under multifarious conditions you will not expect correspondents to name all, even the standard ones, that are used; but simply those that have been most frequently found useful in the practice of the particular writer, and I have confined myself accordingly.

A FEW HINTS ON SUMMER COMPLAINTS.

By J. B. GREGG CUSTIS, M. D., Washington, D. C.

FIRST VICE PRESIDENT AMERICAN INSTITUTE OF HOMEOPATHY.

True cholera infantum is a comparatively rare trouble with us, because, as Homeopathists, we are very strict in our diagnosis and prompt in treatment. When we find a case we recognize a diseased condition the seat of which is primarily the brain, heat being the exciting cause, though underlying it there is often a psoric diathesis. This diathesis, when it exists, has a bearing on the final result of the case, not on the immediate treatment.

My experience shows that *Belladonna* is most

frequently called for, *Aethusa* next, then *Apis*. After the use of these remedies, which are first called for, our case is either convalescent, beyond hope, or has settled down to diarrhetic trouble, with the possibility of a hydrocephaloid condition. This has to be met by any one of a possible fifty indicated remedies.

As to the diet, I immediately stop any food containing milk, giving Mellin's Food, without milk, Imperial Granum without milk, rice or barley water without milk, only returning to it in the most gradual way by adding to one of the other foods indicated.

As to hygienic measures, keep the patient cool, insist upon a flannel bandage over the bowels, and that the child shall have either no stockings on, or merino ones.

The water used should be spring water, such as has been tried by the physician, and known to be non-irritant to the stomach of such patients.

You ask further that I give my experience with the other summer bowel complaints. Such summer complaints are the result in nine-tenths of the cases of improper feeding, and can be corrected by attention to the diet.

Milk as procured in the cities carries more danger with it than any other article used in the nourishment of children. In accordance with this fact, though against my will, I am compelled to use the Swiss condensed milk for the younger children, then using it in connection with one of the artificial foods, when the child is under one year.

With the proper food there is little difficulty in finding the indications for the Homeopathic remedy, which will correct the bowel complaints of infancy and childhood.

Where the tendency to scrofula or tuberculosis is present the exhibition of the constitutional remedy is often necessary before the one indicated by the symptoms as shown by the bowels, will have its effect.

You will see by the little I have said that in accordance with my opinion the treatment of these conditions is made comparatively simple. I do not mean by this that I cure all of my cases, though in spite of the heat I have been especially blest as to results during the present season.

My advice to the young members is, rest assured that no method offers greater help for the suffering child than that offered by Homeopathy. And do not blame yourself for losing a certain percentage of children from cholera infantum, or the other summer bowel complaints. The physician who does not lose them from both causes is only spared by lack of opportunity.

CHOLERA INFANTUM HINTS.

By A. R. WRIGHT, M. D., Buffalo, N. Y.

ex-vice-president American Institute of Homeopathy.

It would be presumption on my part to give an essay on cholera infantum, considering the valuable literature on this treacherous disease by some of our best men; hence I will give only a few points that would occur to me on being called to a case.

My first question to decide is: Has this child been properly fed? In nine cases out of ten I find it has not. Success in choosing diet taxes our utmost resources in studying the variety and the quantity of food and in making observations on its effects. The doctor is not usually called until the preliminary etiological factor has done its work in causing intestinal mucous irritation from a ferment of some indigestible food, and sometimes extreme prostration. My first object, then, is to find some easily digested food for the weak stomach, one that will not readily ferment. I do not believe in making a chemical laboratory of a child's stomach. First get digestion and assimilation of a light food. When this is accomplished feel the way carefully to more nourishing articles being careful not to allow overfeeding of the weak stomach.

Food—For the first requisite good breast milk is the best and also for indefinite continuance. In its absence I try such foods as arrowroot, rice water, barley water, milk peptonized with Fairchild's peptogenic milk powder, the domestic flour ball (after the several hours boiling of this I sometimes allow the child to nibble bits of it dry). Feed liquids with a spoon in small quantities every half hour or oftener.

Careful observation must be made in passing on to more nutritious foods as the case may require. For these I consider Mellin's, Ridge's and Horlick's foods, Imperial Granum, Robinson's Barley, etc., choosing the one that shows the best digestion. In careful observation I would include a critical examination of every stool.

Hygiene—The hygienic care, which in nearly all cases is bad, defective, dangerous, covers improper clothing, impure air, foul skin, etc. No distinct rules can be laid down on this; the physician must use his good judgment on each case. If bathing is ordered, I prefer sponging with warm water and alcohol. For the nervous prostration which is so threatening, I use compresses of hot water and brandy over stomach and bowels, or the spice poultice. Dress the child in loose, light flannel. *Keep the child quiet* and give it plenty of fresh air. As soon as the strength will permit give it a *change* of air. In this city we have a good prescription in the excursion boats on the broad Niagara.

Treatment—Third, but not by any means least, is the medical treatment. In this I generally feel safe in following Bell on diarrhea, not ignoring any of our materia medicas, and not following a routine method. For the readers of the Century it is scarcely necessary to give special indications for such remedies as *Ipecac, Baptisia, Mercurius corr., Tartar emet., Arsenicum, Belladonna, Carbo veg., Iris, Pulsatilla, Rheum*, etc., etc.

Generally, alcoholic stimulants are contra-indicated; but in conditions of extreme exhaustion I give minute doses (one to two drops) of dilute whiskey, often repeated until reaction appears sufficient for the digestion of simple diet.

CHOLERA INFANTUM.

By C. R. MAYER, M. D., New Orleans, La.

secretary southern homeopathic medical association.

New Orleans is accredited with being an unhealthy city, and not without reason, in that it has no sewerage system, other than surface drainage, that its sanitary conditions are wretched, its summers long and debilitating, heat and moisture the important factors in promoting decomposition of animal and vegetable matter—of which there is an abundance—prevailing almost the whole year round, its drinking water supply from over-ground cisterns catching the washings from the roofs, its privies open vaults, in or near the dwelling houses, its milk supply far from pure, as evidenced by the frequent arrests and convictions of vendors of adulterated milk. Despite these facts, the detailing of which would lead the

medical mind to see visions of funeral processions of white coffins, each one the receptacle for a cholera infantum victim, the mortuary reports show the total deaths from this disease to be but two hundred and twenty-three in 1890, and two hundred and sixty in 1891, these numbers being probably above the general annual average. This, in a city of 260,000 inhabitants, a quarter of whom are negroes, is a showing which will compare favorably with any city of over one hundred thousand inhabitants in the union.

The question naturally arises why, with such surroundings, universally acknowledged to be the most potent factors in the dissemination of this disease, are we so blessed?

The only answer that in a measure seems to explain it is, that our people, particularly our babies, rich and poor alike, live in the open air a greater part of the time. Even when indoors our doors and windows are wide open. Tenement houses are almost unknown, and Gulf and lake breezes sweeping over the city compensate in part by their purifying influence for the almost criminal negligence of mankind.

However, meeting the disease frequently our attention is called from causes to measures for relief, and in no disease is there necessity for more prompt action on the part of the medical adviser.

To briefly outline my treatment of such cases, I correct unsanitary conditions as far as possible by cleanliness of and around the patient; by the liberal use of disinfectants; provide for thorough ventilation, having patient placed in the open air in the shade, where practicable. Our "galleries" or verandas, are excellent places for this purpose. I sterilize by heat all food given, render sterile nursing bottles, nipples, etc., restrict diet to the minimum amount necessary to sustain life and support strength, give milk largely diluted with seltzer water, or peptonize it, give frequent sips of barley, rice or, preferably, toast water, the later prepared by pouring boiling water on a slice of stale bread toasted almost to the charring point, flushing the lower bowel with tepid salt water one drachm salt to a pint of water, thus helping to supply waste occurring from the intestinal discharges, lancing the gums if, during dentition, the child is irritable and the gums red and swollen.

The remedies most frequently indicated and from which I have had the best results are *Cuprum ars.*, *Bryonia alb.*, *Ipecac*, *Nux vomica*, *China* and *Phosphoric acid* in the early stages, with cool spongings of vinegar and water if the temperature ranges near 104°, and *Veratrum alb.*, *Arsenicum alb.*, *Carbo veg.* and *Camphor* in the later stages where prostration is marked. Should collapse be imminent I order extreme warmth, friction of extremities and stimulants, whiskey or brandy by the mouth, carbonate of ammonia in solution by the rectum.

Following these methods, varying of course with the exigencies of the case, uniformly good results have been the rule, the exception being almost invariably those in which hygienic and dietetic instructions were not faithfully carried out.

SOME THOUGHTS ON SUMMER COMPLAINT.

By A. L. MONROE, M. D., Louisville, Ky.

DEAN SOUTHWESTERN HOMEOPATHIC MEDICAL COLLEGE.

It is hard to make any novel suggestions as to the treatment of cholera infantum, as the subject is always, at this time of the year, so generally and ably discussed in the journals. But I have a few suggestions which may or may not be new which I give for their worth.

As to dress. Many mothers dress their children too warmly. The proper dress for a child in its second summer is a crocheted band which holds itself in position by its contractile power to cover the bowels; this, with a little muslin wrapper and diaper is all the child should wear during the day. If the nights are cool an extra garment may be added.

I find sterilized milk to be nearest to the ideal artificial food, and it is made more digestible by the addition of a little salt.

As to therapeutics, we are, most of us, familiar with the usual remedies, as *Calcarea phos.*, *Calcarea carb.*, *Chamomilla*, *Ipecac* and others. Many physicians forget *Psorinum*, which is indicated where there is lack of reactive ability and a tendency to sweat, which is profuse and offensive, and discharges are offensive and acrid.

For the tendency to sweat a great deal remember *Calcarea*, *China*, *Veratrum*, *Phosphoric acid.* The *Veratrum* especially where there is a great debility and tendency to cramping pains before actions. The indications for *Arsenicum* are generally easily read.

Tissue remedies are sometimes useful. The *Natrum sulph.* for profuse, watery discharges with a tendency to become chronic. The *Ferrum phos.* for undigested actions. I associate this drug here with *China*, *Phosphoric acid*, *Calcarea* and *Arsenic.* With nervous children, who have offensive discharges, *Kreosote* is a useful remedy often forgotten.

SUMMER COMPLAINTS OF CHILDREN.

By J. C. NOTTINGHAM, M. D., Bay City, Mich.

EX-PRESIDENT MICHIGAN HOMEOPATHIC MEDICAL SOCIETY.

The treatment, hygienic, dietetic and medical, of cholera infantum, and the usual summer bowel complaints of infancy and childhood?

Great Cæsar, Mr. Editor: That is a subject a whole volume would not exhaust, and a large volume too and to think you want it all encompassed in a brief article! The word brief comes like one of our cooling (?) zephyrs in this locality. (July 27, 1894.)

I first look to the hygiene, and in ordinary practice that means the food and exposures, the cleanliness being well cared for in most families where I am called.

I usually find the mother's milk deteriorated, or the food used wrong, or that the child has been subject to irregularities of feeding and to exposures. I endeavor to adapt the food to the patient's proper nutrition, and if the child is nine months old and the mother is still nursing it I most imperatively order it weaned at once, in all cases.

The food should be the milk of a good healthy cow of common stock, if obtainable, otherwise Mellin's Food in constitutions inclined to constipation when in ordinary good health. Horlick's food is best when there is a normal tendency to looseness of the bowels. In severe cholera infantum, I have found "Revalenta" invaluable.

My observation has been that there has been too much feeding rather than too little. In the two former foods I sometimes direct that a little salt shall be added for its stimulating effect upon the digestive glands; the latter, Revalenta, has directions from which I eliminate the fruit juice wholly.

Quietude and fastidiousness in all the surround-

ings, even to the exclusion of all unnecessary friends of the family and the dear little children.

Quietude and cleanliness, fastidiousness in all the surroundings, and food adapted to the patient and that administered at proper intervals, plenty of good air, but no direct draughts upon the patient, comprises my hygiene.

In the milder cases one dose of the fraction of a drop of castor oil will often suffice, with *Gelsemium, Belladonna* or *Aconitum* to follow.

Mercurius cor.—Slimy, yellow stool, with tenesmus urinæ and drooling. (See *Natrum mur.* for drooling).

Chamomilla.—Greenish-yellow stool with restlessness and wants to be carried, etc.

Podophyllum pelt.—Great pain, manifested by countenance, with nausea and vomiting of bile, with stool light yellow, with tenesmus.

Nux vomica.—Child very cross, restless, nervous; won't allow any one to speak to it; stool dark, offensive, with pain at hypogastric region.

Calcarea carb.—Children of light hair, blue eyes; large head, covered with perspiration; watery, inoffensive stool; great languor and weakness.

Pulsatilla.—Stool variable; nauseous; better in the air, worse in warm room; offensive stool.

Lycopodium.—Vomiting intensely sour, "sour as swill." The fœcal evacuations excoriate the anus and adjacent parts; smells sour, and may be yellow or dark; gases abundant; there is red, sandy sediment in the urine; if that can be kept from the fœcal discharges it may be seen.

Aloe, Apis mel., Arnica, Arsenicum, Belladonna, Bryonia, Carbo veg., Colocynthis, are remedies well known by all, and their indications or pathogenesy and symptomatic suggestions are familiar to all students of Homeopathy, as are those I have referred to, without thought or study, for this brief paper, just as if you had stepped into my office and asked the question you have by letter.

SUMMER COMPLAINTS OF CHILDREN.

By L. C. McELWEE, M. D., St. Louis.

PROF. PRACTICE OF MEDICINE HOMEOPATHIC MEDICAL COLLEGE OF MISSOURI.

I rarely see a case of genuine cholera infantum, but treat a large number of summer complaints, and during the past five years have had the most gratifying results with my way of handling them.

I say "my way," when I should say the "Homeopathic way," as that is the plan upon which I base every prescription, and when well followed it will yield better results than any other, and the nearer it is followed the better the results.

Without descanting further on the application of plain Homeopathy I will proceed to tell what I do medically, hygienically and dietetically.

Remedies—The drugs that have been most useful this summer have been *Belladonna* and *Sulphur* in the order named, with *Calcarea carb* a close third. *Chamomilla, Cina, Podophyllum* and *Bryonia, Rheum, China* and *Pulsatilla,* with an occasional *Natrum sulph.* indication, will cover ninty-five per cent. of all the cases that come to one for treatment.

The other five per cent. will be puzzlers, and will have to be worked out with the aid of Bell's Repertory by even the best prescribers.

It is not within the province of this article for me to give the especial indications for the several remedies above mentioned, for every practitioner reading these pages knows them without my presuming to tell him.

Cold Water—The reason *Belladonna* has been so useful this season has been because there has been so much congestion of the brain, with threatened convulsions, hot head, cold hands, etc.

It is in this kind of cases that I have the most charming results from the application of cold water to the heads of the little sufferers, and by giving them *ice water* to drink. They are universally thirsty, and clutch a glass or cup with all the avidity imaginable, it being a pleasure indeed to see them enjoy the pleasure and benefit derived from a really refreshing drink of good, pure water. The water is prepared for them by being sterilized and put in clean, corked bottles, and laid on the ice, so it is thoroughly cold without being germy. In this city we can have the purest water with the least expense, in getting Crystal Water, which is distilled and thoroughly aerated, and has the advantage of being absolutely pure.

In many instances I have had to absolutely beg the mothers of sick babies to give them ice water, because of their fears of giving the poor little sufferer colic. Once they see its delightful effects and they willingly comply; but the old, inherited prejudice against anything pleasant for the sick has to be overcome, and it is many times extremely difficult to do.

It is even harder to get the ordinary parent to encase the head of the hot-headed, suffering babe in ice water if the demand is really urgent, and only will they yield, many times, until after a convulsion from sheer hyperpyrexia supervenes, when they will be willing to mind. The philosophy of such a procedure is simple enough, as the hot blood fills the head to bursting and submerges the respiratory and cardiac centers with super-heated blood, thus disturbing their functions; incurring an over-production or improper elimination of CO_2, hence convulsions are inevitable. Besides, the normal molecular action of the nerve cells themselves is thereby disturbed and the normal flow of the nervous fluid is interfered with, hence also we have convulsions. Restore the function of the parts to their pristine condition, and you have the storm abated. Cool the base of the brain, and keep it cool, and the treatment of the congestive forms of summer complaint will be easy work.

This advice is given after five years' careful observation on about two thousand cases and I have the first case to see where it has been harmful, or attended by untoward results.

Fresh Air—The non-congestive forms will not need this measure, but much good can be obtained by taking the little patients out of doors and keeping them there a good portion of the time, if their homes are not supplied with a liberal quantity of the best air obtainable.

I remember two cases, twins, who were so ill that it was feared that both would perish, who were always aggravated when in the house, which was very warm, but would sleep some when outside. From the other symptoms, they were getting *Pulsatilla,* and when I was told that they got a little benefit by being outside, I ordered them to be kept out until told to take them in. Two days and nights were sufficient, and at the end of that time they were so well that no further trouble was had with them.

Clothing—The clothing should be light and comfortable. More than half the babies coming under

my observation for the first time are dressed too warm. The poor little things "kick" against the treatment, but their objections are taken to mean "restlessness," and the fond mammas never dream until told by the doctor that the little dears are too warm. If the parent can be made comfortable, this is due the baby also. Many a sick infant will fall into the sweetest restorative sleep in ten minutes when taken out riding, when it would otherwise toss about for hours and be the worse by so doing, if kept in the house for fear of "falling dew," night air, or some other imaginary calamity.

If then, there is so much benefit to be derived by so simple a measure, why not take advantage of it?

Diet—The dietetics of any disease is a science within itself, and especially is it so with these troubles. However, as it is my personal experience that is desired, the question is easier of answer.

If possible the little patient is kept on its natural food, but it happens many times that such an advantage is impossible, when a substitute must be resorted to.

When one sees and reads so much about so many artificial foods, each claiming to be the best, one is more often utterly confused than otherwise. Happily, though, there are a great number of really excellent foods on the market, and the standard ones, Carnick's, Nestle's, Horlick's Malted Milk, condensed milk, etc., are all good, and it is a matter of experiment which of them will agree best with each individual patient.

Oftentimes, though, after the most rigid care and persevering effort has been expended in a vain endeavor to adapt the proper food it will be found that one containing an artificial digestive ferment will be of great service. The symptoms calling for this measure are a constant, ravenous appetite for everythlng in sight; the child wants to nurse all the time and never seems satisfied; the stools are undigested and contain the sum total of the food taken, almost, because it has not been prepared for absorption. Supply the lacking ferment and the effect is wonderful. We may theorize as much as we see fit, as to how a ferment can't do any good, but the fact remains that it does, and that is what we are paid for doing, no difference how much it varies from our theories.

The best article to fill this bill is a Pancreatic Emulsion prepared by Savory & Moore, London. It is so well prepared that with a minimum amount of care it is always fresh, and is so delicately flavored that I have yet to see a stomach that will reject it. I scarcely ever follow the directions on the jars, as they certainly were never intended for babies. My custom is to give it in conjunction with the food, either mixed with it or mixed with a bit of milk, flavored with a drop of Cognac, Blackberry or Sherry and given immediately after nursing or feeding.

If the patient be extremely feeble I give the Emulsion alone, as it is already digested, and puts the system to no effort to prepare it for absorption.

Another predigested food that I like to use is Panpeptone. It is quite palatable and is not usually rejected by the most delicate stomachs. It is very concentrated and possesses the advantage of a large amount of nourishment in a small compass—an object much desired when the stomach is very irritable.

These measures, conjoined with a nightly warm bath, if the strength of the patient will permit, are all that I find needed in the cases that have come under my care.

I have not been guided in these pages by the precept of any text book or author, and may incur some criticism; but if I do, I am prepared to substantiate and defend every position taken.

SUMMER DIARRHEAL DISEASES.

By B. F. BAILEY, M. D., Lincoln, Nebraska.
member american institute of homeopathy.

There are no conditions which come under the eye of the physician which demand more reasoning care than cholera infantum and the diarrhetic affections of children. It is unfortunate that even in our text books infantile diarrheas and cholera infantum are strangely confused. To my mind they are as separate and distinct as cholera, cholera morbus and diarrhea in the adult. It is true that the semi-convalescent stage of cholera infantum may be diarrheaic, but I do not believe that true cholera infantum is often preceded by diarrhea. It is more commonly ushered in by vomiting, followed in from one to three or four hours by choleraic stools. Diarrheas are usually the result of the ingestion of food or foods which the child cannot digest. Cholera infantum, I believe, is more commonly, in fact usually, the result of a suddenly depressed temperature of the body surface during a time of high temperature of the atmosphere. If we could be more careful in the separation of such diseases there would not be so many differing diagnoses when, perchance, one physician follows another in a case.

With these few prefacing remarks, perhaps my plans of treatment may be more intelligible.

Hygienic.—First and foremost I would suggest that every child wear, summer and winter, night and day, a very light all-wool bandage over the bowels. Quite frequently patients say to me that such and such a doctor says, "It is cruel to keep a band of all wool on children in hot weather." Five years ago it occurred to me, partly on account of the above remark and partly because I thought it might prove beneficial to myself, to begin wearing a light abdominal bandage and all wool underclothing twelve months in the year. Prior to this time I had suffered frequent irritation of bowels during the year, and at no time in ten years had I been strong. In the five years I have gained in weight forty pounds and have been almost continually well. During hot weather I have not suffered as much with heat as I used to in cotton underclothing and without a band. This experience has led me to persist in experimenting with the wearing of clothing as above described, especially in children. My conclusions have been that the abdominal band is the most necessary thing and that no one hygienic measure will go as far toward preventing summer affections of children.

For bathing it seems best to bathe hearty children once each day in warm weather, this to be followed by brisk, dry rubbing, and, if the mother understands something about it, and she may easily learn, she may give the child gentle massage and Swedish movements. Should the child be frail I believe the water bath should not be used oftener than every other day, but the alternate day the gentle dry rub will better take its place. Never let the temperature of water for bath be too high, as it will debilitate rather than invigorate. Let the child sleep alone if possible and never part of the night alone and part with the mother, as the change of temperature from the bed beside its mother to the crib alone is one of the commonest causes of cold. *Protect the bowels, give plenty of air and keep the surface clean and vigorous.*

Dietetic—If the mother is a healthy, calm woman breast milk is of all things the diet. If not, I believe in these gynecological days many a babe is better intelligently bottle fed by an intelligent nurse or mother. For a bottle food there is no food which will agree with so large a per cent. of babies as sterilized milk properly prepared from a proper supply and fed from a bottle with nipple on the neck of bottle and without rubber tubing. I believe the most important precaution to be taken is that the milk and cream to be used be taken from the morning milking. This because the cow during the night is quiet and cool, while during the summer day she is heated and in continual exercise; hence the difference between the milk of morning and night. I have often found a bottle fed baby fairly well by day, but suffering with colic and diarrhea at night, relieved as soon as the hyper-acid night's milk was changed to a morning supply. *Make it an important rule to prepare your sterilized milk from the morning supply.* In cholera infantum proper I have been very successful in taking away all foods in which milk is used and substituting temporarily Mellin's or some similar food prepared with water alone, gradually returing to milk as convalescence sets in. In the early stage of cholera infantum the contents of the stomach are too acid for proper digestion of milk and later when the serum of the blood is actually being poured out it is too alkaline. During the early hyper-acid state it is useless to attempt to give food. Later when the bowel symptoms predominate and the stomach secretion has become alkaline, the food above described with its mildly acid reaction and readily assimilable form will not disappoint. I do not believe it is often, if ever, necessary to go outside of these food preparations. If it becomes so, probably peptonized milk will be the best.

Medical Treatment.—Little is to be said beyond the indicated Homeopathic remedy, always given in form of powder or disc, as medicine prepared in water rarely agrees with the sensitive stomach of a vomiting child. In sub-acute bowel troubles where fermentation seems determined to persist, I have, in a few cases, cut the trouble quickly short by a few ten drop doses of *Listerine.* Without rehearsing the so familiar indications of our Homeopathic medicines, I would call attention to the fact that I have often seen violent diarrheas, accompanied by fever, resulting from suppressed perspiration and similating cholera infantum, yield immediately to *Ferrum phos.* after the failure of *Arsenicum,* which seemed well indicated. Also think of *Ferrum phos.* where the intestinal villi seem to have lost their absorptive power. Do not neglect *China,* which is so often prescribed for the adult and so rarely for the child. These two remedies, with *Arsenicum, Veratrum alb., Aethusa, Bryonia, Chamomilla, Phosphorus, Podophyllum, Pulsatilla, Calcarea phos.,* will usually serve us, and not, by their great number, confuse us.

CHOLERA INFANTUM AND KINDRED AILMENTS.

By LIZZIE GRAY GUTHERZ, M. D., St. Louis, Mo.

VICE-PRESIDENT SOUTHERN HOMEOPATHIC MEDICAL ASSOCIATION.

At the first glance my subject may seem trite and common-place—yet at what season could an article on these troublesome disorders of the little people be more apropos? Still I fear I can say little on the subject—important though the subject be—that will not be a re-hash of the theories, experiments and experiences of the older practitioners and not a great deal to enlighten the newly-fledged physician.

Cholera infantum is essentially a disease of early infantile life, common to hot weather in all climes, Yet medical literature fails to furnish anything special as to the etiology of the disease. The symptoms are few, sharp and well defined—sudden and violent at the onset and usually prompt in conclusion—terminating in death or convalescence in twenty-four or forty-eight hours. True, the convalescence may be complicated by certain sequelæ which may give the case a protracted course. The probable age of the patient is from the sixth to twenty-fourth month; the prevalence of the disease is peculiar to hot sultry weather and the time of manifestation is generally night. In the character of the vomiting and purging, extreme prostration, and yet unrest, profuse, clammy perspiration, cold, shriveled extremities and livid complexion of the cholera infantum sufferer we behold a picture so sharply defined, with symptoms so characteristic and pronounced that the Homeopathic physician is led straightway to a list of remedies, small in number but prompt in result.

Foremost among these I place *Arsenicum, Veratrum alb., Ipecac, Camphor* and *Cuprum*; nor should be forgotten in this hour of need *Podophyllum, Iris versicolor, Aethusa* and *Kreosotum.* With these reliable friends at hand, and favorable surroundings, the prognosis may ordinarily be set down as promising.

At the height of this malady food is undesired by the little patient and is a positive hindrance to recovery. A most excellent palliative for thirst and nausea, and also a fine nutrient, I find in a teaspoonful of hot or cold water, as the case may be, in which is put one or two drops of Bovinine (Bush's preparation), and given at intervals of twenty or thirty minutes.

Hygienically, a plentiful supply of fresh air is good, and sponging the body with tepid water and alcohol and wrapping the lower extremities in hot flannels is very grateful to the little one.

As to the causes of cholera infantum and other summer complaints of children, undoubtedly the hot, sultry weather acts upon the nervous and cerebral sensibilities of the teething child, and is an important factor in inducing disease. And errors in diet act as both predisposing and exciting causes. In fact, the general practitioner finds in treating diarrhea of children, whether it be in the simple or non-inflammatory, or inflammatory forms, that the most fruitful source of the disease and the greatest stumbling block to cure, lies in the irregular, often excessive, nay, foolish manner in which the babies are fed. Even among intelligent, cultured mothers one finds a startling lack of knowledge and common sense in this matter of diet. And when coupled with the dietetic irregularities we encounter filthy surroundings, dark, badly ventilated rooms and over-crowded houses, the problem which confronts one is appalling indeed. Still could the mothers and nurses be educated to the point of believing that "Cleanliness is akin to Godliness"—for even with limited opportunities dirty surroundings can be bettered—the mortality would be lessened and physicians rewarded by cures for their labor.

To some these remarks may seem irrelevant to the subject in question, but from my standpoint a close observation of the peculiarities of those in charge of children often enables the physician in charge to see the way more clearly to the treatment of the case—possibly a super-refinement of Homeopathic principles as I advocate studying the symptoms of both

nurse and child. Try and impress upon mothers that checking perspiration by exposure to draughts or suppressing eruptions will serve to provoke diarrhea and dysentery; that when baby vomits and purges no food should be given from four to six hours; that all children should be bathed in cold water at least once a day in the hot season. And above all things else to give no laudanum, paregoric, soothing syrup or teas on their own responsibility.

In the entero-colitic variety *Aconite* should usually begin the treatment. Continue it through the febrile prevalence. The *Mercuries* will usually be all-sufficient in simple relaxation of the bowels. *Calcarea carb.* plays an all-important part in stools of undigested food and *Chamomilla, Ipecac, Dulcamara, Podophyllum* and *Veratrum alb.* have each their respective place in this class of diseases. Removing the child to a cooler climate or higher altitude has been prolific of untold benefits and the "Fresh Air Missions," out in the country, or on the water, have been life-giving to tens of thousands of tenement-house babies.

CHOLERA INFANTUM.

By CHARLES A. WILSON, M. D., San Antonio, Texas.
MEMBER AMERICAN INSTITUTE OF HOMEOPATHY.

Cholera infantum is one of the diseases of infancy that occurs too often. I mean far more often than there is any necessity for. Fond parents in their anxiety lest the baby is crying from hunger, or because they know it will keep it quiet, at least for the time being, are apt to give it food at too frequent intervals—a practice which if persisted in results in disorders of the digestive tract. Irregularity of feeding produces a similar condition and the child becomes emaciated (or what is just as bad, too fat), cross and fretful. The digestive organs take on a catarrhal condition, the food, improperly digested, is not assimilated or is rejected by the stomach, the stools become too frequent or the bowels constipated. The child may take on fat but is poorly nourished—the muscles are soft and flabby and while it may remain fairly well so long as there are no disturbing influences it is unable to lay by any surplus vitality to be used should the time come when it is needed.

When called to a case of infantile bowel trouble one of my first inquiries is in regard to what and how often the baby is fed. In my own obstetrical practice I am usually able to control this and I am becoming more and more convinced that the frightful mortality among infants might be largely reduced by simply regulating their habits and feeding from the time of birth.

For several years I have advocated the feeding of newborn babies at intervals of four hours, giving five meals from 6 A. M. to 10 P. M., allowing nothing but water during the night, reducing this to four meals a day after six months and I have had no case of serious bowel trouble where this rule has been followed out conscientiously. In cases where the child has been fed irregularly and frequently the error should be remedied—the time so arranged that the meals come at regular intervals *during the day* and the intervals made as long as possible. What to feed the baby is not so easily settled. The breast should be depended on entirely in all cases under a year old and when that source of supply is sufficient. Where this is not to be had or where the supply is deficient I have usually been able to get along successfully with malted milk or sterilized milk—the latter my preference.

In preparing this, instead of using cream from milk that has stood during the day or night, the fresh milk is allowed to stand until the cream begins to show on the surface. This is skimmed and used in the following proportions:

Rich milk 6 parts.
Water 3 "
Sugar milk q. s.

This subjected to steam heat for an hour at a temperature of 160 degrees is thoroughly sterilized without in any way interfering with its nourishing properties and is more palatable than boiled milk. Solid food and animal or chicken broths should never be given.

The water used for drinking purposes should be boiled and given at a temperature of spring water or hot if there is much thirst.

Water to which a little claret has been added is less apt to disagree and especially so if a change in drinking water becomes necessary.

Protection of the abdomen by a flannel bandage will be of benefit in severe or obstinate cases. If there is much abdominal tenderness, warm, stimulating poultices or flannel cloths wet in hot brandy will be preferable.

The selection of a remedy must be settled by a study of the Materia Medica although one soon becomes attached to a few.

Antimonium cond.—Stools are pasty, lumpy and undigested, the tongue is coated white and vomiting is persistent.

Podophyllum—Has yellow fecal stools or profuse watery stools with meal-like sediment—aggravation in the morning. Rolling of the head from side to side and the half closed eyes indicative of brain complication are strong indications.

Chamomilla—Stools are mixed yellow or green and white and very offensive. The child is cross and fretful and the gums are usually red and swollen showing the origin of the trouble.

Croton tig.—Has three prominent indications; these are "yellow watery stool, sudden expulsion, and aggravation after eating or drinking."

Ipecac—Is indicated by green stools with prolonged and persistent nausea.

Psorinum—Is characterized by the ever-present and exceedingly offensive odor from the body.

Aethusa—Stools are yellow. The characteristic symptom however is the vomiting of milk as soon as it is taken, in large hard curds.

Arsenicum—Has profuse, dark, watery, offensive stools, with thirst and restlessness.

Calcarea carb.—In soft, flabby, fat children abdomen prominent and a general unhealthy appearance. Sweating about the head. Stools are yellow, watery and offensive.

Phosporic acid, Nux moschata, Gummi gutti, Helleborus, Colocynthis, Veratrum alb. and *Mercurius corr.* should not be overlooked.

I place great reliance upon the regulation of diet and habits and have found the best results in those cases in which food is given at long intervals, even where but little is taken at a time. The child soon becomes used to certain times for taking food, and sufficient time should be allowed for the complete emptying of the stomach and a certain amount of rest before more food is given. This is all the more important where the digestive powers are impaired and digestion retarded.

The constant craving for food or drink only goes

to show the congested condition of the stomach and keeping it constantly at work with no interval of rest only serves to keep up the trouble.

A FEW THOUGHTS ON SUMMER COMPLAINT.

By SHELDON LEAVITT, M. D., Chicago.

PROF. OBSTETRICS AND DISEASES OF WOMEN HAHNEMANN MEDICAL COLLEGE.

I have a friend who for many years has done an extensive general practice, numbering among his patients the usual proportion of children, but who, according to his own statement, has no love whatever for children. When treating them he feels an utter want of confidence in himself, and finds that his success is not phenomenal. Now my notion is that as one is not competent to offer sage advice concerning the moral and domestic training of children who has never been a parent just so truly is one relatively incompetent to assume the medical management of infants who has never known parental trials, care and interest. Experience counts far more in the treatment of young children than anywhere else.

When I entered upon medical practice I expected to be loaded every summer with a vast number of serious ailments among infants. My expectations might have been realized had my practice run in different channels, and into districts where babies and dirt are always most conspicuous. It is really true, however, that I seldom have many cases of alarming gastro-intestinal troubles, and most of those which have fallen to my care have responded promptly to the treatment given.

Ailments of this kind prevail chiefly among bottle-fed babies, and, knowing this, I aim to have as few of the latter as possible. My puerperal women get little encouragement from me to wean the baby. I usually insist that, in spite of sore nipples, social demands, and the suggestions of poor milk, they keep them at normal lactation. Prophylaxis in which this sort of management is conspicuous is the most effective treatment for summer-complaints of infants.

But notwithstanding every precaution a certain number of cases will develop. When they occur among children who are nourished at the breast there is seldom little trouble in bringing the ailment under control. But a case occurring in a child upon the bottle is *sui generis*, and requires most careful study.

Food—First of all the food should receive attention. Herein usually lies the true cause of the disorder. If we find the usual signs of indigestion we will do well to determine whether they probably proceed from the quantity or from the quality of the diet. They are attributable as frequently to the former as to the latter. I have been called to children who were disintegrating rapidly, and begun my treatment by dividing the quantity of food in the middle, only to find that medicinal treatment was superfluous. We should be in no haste to make a change in diet if the food employed is theoretically well-suited to the child, and, especially, if until recently it has supplied sufficient nourishment. Administer the indicated remedy and watch effects.

Among foods I am partial to Lacta Preparata for young babies, and next to that I rate dilute cream. Still I am not limited to these. *Nothing but the prescribed food should be allowed.*

Remedies—With respect to the matter of remedies, I do not hesitate to say that I get my best results from symptomatic prescribing. I use the single remedy, but prescribe it in potencies from the highest to the lowest.

Among remedies, that which I find most commonly indicated, and from which I obtain the most marked results is *Arsenicum jod.*, from the 3x to the 30x potency. An adjuvant which I should not fail to mention is warm water by the rectum, given to the extent of full flushing. The effect of the enema is improved by the addition of salt in the proportion of a teaspoonful to a pint of water.

TREATMENT OF CHOLERA INFANTUM.

By J. RICHEY HORNER, M. D., Allegheny, Pa.

SECRETARY PENNSYLVANIA HOMEOPATHIC MEDICAL SOCIETY.

Medical.—In the medical treatment very few remedies are usually found necessary, one reason for this being the rapid course of the disease, another the fact that so many cases develop meningeal complication. I have used *Podophyllum* for the profuse watery stools—overflowing everything—painless; *Ipecac* where the vomiting and retching are the prominent symptoms; *Arsenicum* with its well-known thirst and restlessness with prostration; *Aethusa*, in *bad* cases, where there are meningeal complications, perhaps convulsions, with vomiting of curds of milk; and *Helleborus*, where there is the tossing of the head, which is very hot, twitching of the muscles and gagging.

Diet.—With regard to diet, mother's milk by all means, that is, if she is not a nervous, excitable woman, if she is not menstruating. So little attention is paid to this latter point—*no mother who is menstruating should nurse her baby.* I would stop it in the middle of the much dreaded summer in the midst of an attack of cholera infantum, which has, perhaps, been caused by that very reckless disregard of nature's orders. If not mother's milk, then cows' (note the *plural*) milk—prepare it for a child under a year—be careful not to feed your *sick* baby too much—as follows: One teaspoonful cream; two teaspoonfuls water; three drops whisky or brandy; fifteen drops lime water—no sugar. Give this every three hours—perhaps every two. Give plenty of cool water if the stomach will bear it.

Sometimes we may use barley water. Take a teaspoonful of barley, crack it in a coffee mill, put it in half a pint of water, boil and add its own bulk of milk or water. Bovinine may be needed in two to three drop doses every two to three hours.

Use stimulants locally; whisky warm—on the bowels—a suggestion I have noticed somewhere—when the pain seems severe, apply *Menthated camphor* to the abdomen about the navel and cover with flannel.

Hygiene.—A necessity is fresh air, and plenty of it. Keep the babies out all the time—in the shade of course—but out if it is only in a ten by twelve back yard. Bathe perhaps twice daily in warm water, to which has been added brandy or whisky—an ounce to the pint.

Keep the baby as quiet as possible.

Such is a fifteen minute sketch of my care of babies with cholera infantum.

HYGIENE AND FEEDING OF INFANTS.

By H. E. BEEBE, M. D., Sidney, Ohio.

EX-PRESIDENT OHIO HOMEOPATHIC MEDICAL SOCIETY.

How shall we feed and care for the babies, is a question that has been agitated for years. Our medical journals during each summer devote much space

to this subject. Why should it not be so when the question is as unsettled as it is? This is certainly an important field for investigation when we know from official record that one-fourth of all the infants born into the world die before attaining the age of five years, and when we know that one of the leading causes if not the principal cause of this great mortality is an irritation of the digestive track from improper food. Now, since the function of digestion is so complex, from the various organs connected with it, and each having a separate office to perform, the nature of these cases is likely to differ. The general hygienic care of the infant differs but little among all physicians, nor do they differ as to the mother's milk being the best food for it when mother and child are in good health; but it is when it becomes necessary to resort to artificial foods that this diversity of opinion arises. Why is it so? There is certainly something wrong, and we believe that wrong to be in trying to adopt a specific diet for all babies. This, like the "Fountain of youth," never will be found; besides there are various varieties of afflictions under this head. The constitutions and temperaments of babies vary as in those older in years.

Who but a fanatic (and in this sense we may all be fanatics) would attempt to lay down a specific diet for adults?

The cases in which to prescribe and proscribe a special diet, for all ages, are those of indigestion and inanition, in some of their forms and the major portion of the infant's troubles belong to this class, especially during the summer months. This is proof that warm weather is an etiological factor in these troubles, by it being more difficult to furnish good, pure and fresh food for the infant.

I have nothing specially new to offer, only desiring to impress upon the members of the profession the importance of individualizing our cases, not only as to drug treatment but as to diet and regimen. We have much confidence in prophylactic measures in preserving health as well as in treating diseases; the two branches are so intimately blended in their relationship as to make it difficult to treat them separately, the prevention and treatment being so nearly the same in a hygienic and dietetic point of view. Prevent disease by telling our patients wherein they err. Sickness is a result of the violation of some one or more of nature's laws, and if we can remedy this it is often prevented or if present is cured. The cause being removed the malady soon disappears. Disease means a lack of ease. Nature is the great health restorer and all we can do is to assist and aid her in this course.

Many of man's rules are acquired and hence not natural. Just so far as they depart from nature they fail to accomplish the desired purpose. The best physician is the one who keeps his patrons from getting sick, or when ill from becoming worse; one who observes well sanitary laws. Conservative medicine is of as much or more importance as conservative surgery. Why are hand-fed children more subject to sickness? Because this is not nature's plan. We are trying to imitate her and the nearer we come to her the better will be our success. Certainly when there is nothing to contra-indicate it, bringing the child up on the mother's milk is the proper way.

Some mothers do not possess a milk calculated to benefit their offspring. Her ill health or physiological condition may not be adapted to nursing the child. If we can remedy this defect it is our duty before weaning the babe.

Constitutional diseases is another cause for not nursing, as consumption, cancer, or syphilis. There are cases where the nursing disagrees with the mother as much as the child. If we are sure that she is in good health, be certain that the milk disagrees with the babe before weaning it. The quality of her milk must be considered rather than the quantity. The young mother often thinks that she has too little nurse, and by the advice of some good mother resorts to ale or beer to increase the quantity, and she can't see why baby does not get fat. We have seen cases where the quantity was deficient and the mother did not know it; the babe was really starving; her breasts were large and apparently healthy, but they were too large, had too much adipose; instead of secreting milk, fat is formed. In these cases if the child is suffering from a lack of nourishment we can test it by feeding immediately after nursing, when it will show its hunger. In this case do not wean the child, but keep on nursing and feed just enough to make up the deficiency, until by proper treatment of the mother the milk increases. The cause for this deficiency can generally be found and remedied.

Nearly three times as many hand-fed children die during the first year of life as when suckled by the mother. And when a wet nurse is employed the mortality is nearly double the first three months. How little this is realized. Want of breast milk is not the only cause. Much depends upon the physical condition of the child as well as the food supplied. Hand-fed children are more likely to be weakly and poorly developed; and yet there are exceptions; some children thrive well upon artificial food and are the perfect pictures of health.

As soon as the child is born, if it cries to any great extent the good mother concludes that it has the colic, or is hungry and it is absolutely necessary that it must have some medicine and be fed. They proceed at once to give it some catnip-tea, cracker broth, sweetened water, whisky toddy or possibly paregoric. Seldom do they think the infant needs rest above everything else. After a few days it must have saffron tea to remove the yellowness from the skin. They do not know this is a physiological function and it needs nothing. The medicine chest is not complete without that all important remedy Castor oil, recently Castoria; if the bowels do not move every few hours it is such a grand remedy, besides if the little thing has any trouble from one end of the alimentary canal to the other, it is so healing and soothing. If the urine does not flow soon after birth it must have some watermelon seed tea.

Little do they think the mucous membrane of the infant's stomach is as soft and delicate as the finest velvet and that from its birth this procedure is calculated to injure and cause a multitude of afflictions to the little darling. In the past many physicians have not only tolerated but advised this doping process. We must educate our patrons differently.

Look well to the general surroundings of our little charge: Is it properly clothed? Do not sacrifice health and comfort to appearances by clothing it too much or too little. Has the nursery sufficient light and ventilation? Is baby fed at a regular time and at no other? Do not let it nurse too frequently at night; it has been well shown that this is one great cause of infant colic; in fact, are all its habits regular as to bathing, changing, etc. Remember that "Cleanliness is next to Godliness" not only with the child but all about it. When sick we must have full control of the patient; banish all officious attendants, soothing syrups, "yarb teas," and many other do-

mestic agents. They may do no harm in some cases but here we know they are a detriment. Proscribe all this in a pleasant way, but if this fails to answer use harsh means. Our rules must be complied with. The secret of good nursing is not to be too officious. "Doctor," said a kind hearted old nurse, "is it possible for me to do anything more to make this poor patient comfortable?" "Certainly it is," he replied, "sit down and be quiet."

How common it is from the birth of the child until three months of age for the mother and nurse to attribute all ills of baby to colic; from this age to two years old everything is from the teething process; and from two years to ten or twelve the child certainly has worms, and in reciting its symptoms they never fail to mention this first.

When shall the baby be weaned? At about one year of age and when it has several teeth; the best time of year is during or near the months of May and October. Often the child is nursed much longer under the pretense that they do not wish to wean it until after the second summer. The real cause is to prevent conception, knowing this is not so liable during the nursing period. Very seldom is the milk fit for the child after one year old; it has largely lost its nutritive properties, and the babe is much better off without it. There is another class of mothers that want an excuse for weaning the infant early, through a mock modesty or an outrageous custom that it is only fashionable to employ a wet nurse. This is certainly aborting the desire of the Divine Creator.

Aristocracy seems to think the rearing of children should be given over to the so-called lower classes. If they are so unfortunate as to occasionally have a baby, it must be reared by someone else in early years. We have sometimes thought this proper in many cases and better if continued to maturity. They ought not to be allowed to bring up the child in their own footsteps. Mothers sometimes wean baby by reason of sore breasts or cracked nipples contrary to her desire. Our duty in the lying-in chamber is not fulfilled until we know that lactation is healthfully established. For cracked nipples I formerly had much trouble until I began prescribing the Phœnix Nipple Shield; this will overcome most cases. There is no advantage where the mother has an abundance of milk and is in good health, in feeding extra food; it is a detriment.

Babies are sometimes fed from the time they are six weeks old and nurse abundance at the same time and are the picture of health. This proves nothing only that they are gluttons.

Now, if the child must be raised by hand, what are the best substitutes for human milk? The simplest of these is milk from another animal. In this country that animal is the cow. Let us see how this differs from human milk. "Natural milk contains in a divinely determined proportion all the elements that make up an infant body; but thousands of infants yearly starve to death, many of them in homes of affluence, because they are fed on artificial foods, the best of which fall far short of nature's marvelous supply." In cow's milk the quantity of water and sugar is less and the solid matters greater. Hence, in preparing cow's milk for the child, we must endeavor to remedy these defects, and if the substitute contains these ingredients in proper proportions we will have a specific gravity of about 1030 and an alkaline reaction. Routh says: "The nutritive properties of milk depend upon the combination of three alimentary substances: First, the combustible, or those subservient chiefly to respiration and the fattening of the body, which are two in number. The fatty portion in butter, and the sacharine portion in sugar of milk. Second. The nitrogenous or plastic ingredients subservient to the development of the fleshy and parenchymatous portions of the body, the casein. Lastly, water and the saline ingredients; phosphates, chlorides of lime, soda, potassa, etc., for the purpose of the liquid condition and the solution of substances."

That we have all these ingredients, first select a good, healthy cow, common stock preferred; I think the milk from the Alderney cow too rich, contains too much fat. What is the cow's age? How long has she been milked? How is she cared for? See that she has abundance of pure, fresh water and is properly fed. Her food and water forms the milk, and if these be impure the milk cannot be good. Slops and malt from breweries and distilleries are not suitable. The milk after their use ferments too soon. Feed the cow clean hay, bran, good grass, free from weeds, and few vegetables, as they are apt to produce too much acid.

No doubt disease is often transmitted by the use of diseased milk. In cities the improper care of dairy cows is a great promoter of infant mortality, and it is well that sanitary authorities are keeping such close watch in this direction, for often the source is not suspected.

The cow's hygiene and regimen are of as much importance as that of the child.

Until quite recently it was considered that the child could not digest starchy foods and yet the cases where they cannot digest it are exceptions. Dr. J. M. Keating in a paper based on experiments made at the Philadelphia Hospital reaches the following conclusions: "The saliva of some infants possesses the property of converting starch into glucose regardless of age. The age of infants cannot be taken as an indication of this property of its saliva. When such a condition is found to exist, a small quantity of well prepared farinaceous food is valuable as an element in the diet, incorporated with mixed cow's milk.

An examination of the stools of children so fed, would be a guide as to the quantity of starchy food to be used, and when farinaceous food is employed, slow feeding is probably preferable to the bottle. To determine when the child can digest farinaceous food is to experiment. What shall be used to sweeten the milk, sugar of milk or cane sugar? This is another disputed point. I prefer sugar of milk since it is of animal origin, and I have decided that animal food is preferable, and the milk sugar undergoes fermentation less rapidly. Do not boil the milk unless it be to destroy diseased germs we may suspect where we are not sure of its purity. Boiled milk constipates the bowels by apparently solidifying the casein. Not a reality. The gaseous properties are thrown off and gives it this property; and it is more difficult to digest and acts similar to an astringent. We find much opposition from the laity in this. It has been taught them from time immemorial and at this day to boil the milk when the bowels are relaxed. If there be an over-acid state of the child's stomach the saccharine and casein properties are too great; more fat is required now, cream one part and water three parts will be to an advantage. In children over one year old we may give eggs or raw scraped beef properly seasoned. Peptonized milk is being highly recommended by leading pedologists. The theory looks very well. I have not tried it. It is probably good in some cases, but not a cure-all. Condensed

milk is, at times, to be preferred, especially in hot weather. Teach the young infant to drink by feeding first with a spoon, and thus avoid sour nursing bottles. If obliged to use the bottle apply the common nipple over the mouth of the bottle. In using the long tube running to the bottom of the bottle it is impossible to keep it sweet with the best of care. I oppose meat broths in any looseness of the bowels either in the child or adult; it will aggravate the difficulty. All things considered, such food must be used as will be easiest assimilated as well as nutritious. I am not much of a friend to the different patent foods during the first year of child life; they usually contain too much starch. I do not believe all Dr. Cutter has said about them, but in his writings there is some little truth. Pepsin or Lactopeptin is of advantage in convalescence after gastric difficulties. No two children can be treated exactly alike. Dr. Holcombe says he has frequently found the diarrhea of children modified by the cautious use of oranges, peaches, bananas, strawberries, and such ripe, juicy fruits as may be in season. No two authors agree as to artificial feeding. Volney, in his Diseases of Children, says: "No child with intestinal catarrh can tolerate cow's milk." This positive statement, like many others, is too broad, it is only true in a degree.

I will close these random remarks with a quotation from Hughes in his second lecture before the Boston University: "The subject of medical art being the human organism, there are two things which the physician has to do for it; he has to preserve it in health, and when necessary to free it from disease. In the execution of the first of these tasks he is a hygienist, in the second a therapeutist." Let us all, in our practice, take a like view of the duties of our profession.

INTESTINAL DISORDERS OF CHILDREN.

By C. F. MENNINGER, M. D., Topeka, Kan.

RECORDING SECRETARY KANSAS HOMEOPATHIC MEDICAL SOCIETY.

In treating the "intestinal affections of children in hot weather" it is necessary to strive to procure for the patient, first, the best possible food; second, the purest air and healthiest surroundings; third, the greatest assistance in digestion, and fourth, the indicated remedy.

Food—It has been my experience that the mother's milk is in quality and quantity the only true material suited to the healthy development of the child and no other food is so suitable for infants under the age of one year, whether affected or not with cholera infantum or choleriform diarrhea.

If this food cannot be obtained or the infant is over one year old then the patient and persistent collaboration of mother and physician are absolutely required. No one artificial food has proven itself applicable in all cases nor have I been able to formulate any rules for guidance in the majority of cases. Every possible contingency and every circumstance present in the case must be thoroughly studied in each and every case before the best possible artificial food can be selected.

Peptonized cow's milk and Mellin's Food for those under one year and malted milk and boiled flour gruel for those over that age have proven to be the most frequent to give satisfaction. Great care must be used not to give more food than is required for nutrition, while the thirst of the patient, which is nearly always great, may best be relieved by cold water, barley water or gum arabic water.

Hygiene—After having obtained everything desirable in the nature of the best possible food and given the patient the greatest assistance in digestion as to time, quantity and other vital particulars then the question of sanitary surroundings must receive their full attention. Cleanliness of bed, room, utensils, clothing, patient, nurse and doctor are absolutely indispensable. That the cool pure air of a salubrious country locality is much more conducive to good health than the hot, impure atmosphere of a crowded city, is too patent to need further comment.

The curative treatment, therapeutically speaking, can only be found by giving that remedy which possesses the physical and diagnostic symptoms of the case and which corresponds also to the special distinguishing and peculiar symptoms which mark the individual case.

NO SUMMER COMPLAINT IN FRISCO.

Editor Medical Century:

I am sorry I cannot offer you anything of any special value in regard to the treatment of cholera infantum. It is so natural for a San Franciscan to extol the perfection of his climate, even if I must admit therefore a lamentable limitation of my experience in the treatment of so-called summer diseases. The fact is, we in San Francisco have no summer in your eastern sense and experience no summer complaint to speak of. A few cases come within the range of all of us, of course, but they are exceptional and mild in their course, requiring only a little attention to diet and hygiene together with the indicated remedy.

Wm. Boericke, M. D.

CHOLERA INFANTUM HINTS.

By H. C. ALLEN, M. D., Chicago.

DEAN HERING MEDICAL COLLEGE AND HOSPITAL.

In my experience the two points of chief importance in the management of this dreaded affection of childhood are, First: *The hygiene of the patient.* Second: *The psoric diathesis.*

If the child has been fed on artificial food, and the majority of these cases have been, remove the source, or one source of irritation by substituting for the food hot water for twelve, twenty-four or even thirty-six hours. Give the irritated mucous membrane of the digestive tract, a rest, *absolute rest,* for a time to be determined by the reactive power of the vital force of the patient. No danger of exhaustion or loss of strength. When feeding is resumed, change the food for one adapted to the changed conditions of the patient.

The chief difficulty in the medical treatment consists in the fact that the selection of the remedy is necessarily confined to the objective symptoms alone. The indicated remedy should be carefully chosen and a dose given. If no marked improvement occurs in a few hours and the symptoms remain unchanged it may be repeated, or given in water after every stool. But if the indicated remedy fails a resort should at once be had to the antipsoric—*Calcarea, Sulphur, Iodine, Psorinum, Silicea,* etc.,—according to constitutional indications. When the indicated remedy fails the cause is generally found in some constitutional miasm present in the patient.

CHOLERA INFANTUM AND SUMMER COMPLAINT.

By L. C. GROSVENOR, M. D., Chicago.

PROF. SANITARY SCIENCE CHICAGO HOMEOPATHIC MEDICAL COLLEGE.

"An ounce of prevention is worth a pound of cure." It has been my custom for many years to have a half dozen bedside chats with young mothers at my daily visits following the labor. The object has been to aid these young mothers to a beautiful motherhood. One of these chats is upon "regular nursing and the reasons why." In that conversation I suggest to the young mother the wisdom and healthfulness of regular nursing. I give them this formula, "every three hours and once in the night for the first three months, then every four hours and never in the night for the balance of the nursing period."

Without going into lengthy details of this conversation, let me give you one beautiful result. Each summer for many years, from the middle of July to the middle of September, I have had to treat a large number of cases of cholera infantum and summer complaint. So far I have not found one case among the regularly nursed babies. They were all babies who nursed at frequent and irregular intervals, and hung upon the breast half of the night. What better proof than this can we ask of the value of regular nursing as a preventive of cholera infantum and summer complaint? The secret of its value lies in the great and universal law of labor and repose. When the stomach has worked one and a half hours on a breast of milk and that meal has found its way through the pyloris into the intestine, the stomach should have at least an hour and a half of rest before being asked to digest another meal, rest to the muscles of the stomach fatigued with the peristalsis, rest for the peptic glands which require at least an hour and a half to refill themselves preparatory to another meal.

CHOLERA INFANTUM.

By R. N. FOSTER, M. D., Chicago.

PROF. OBSTETRICS CHICAGO HOMEOPATHIC MEDICAL COLLEGE.

Is cholera infantum as frequent in this city as it was twenty years ago? The present writer, judging from his own professional experience, would answer this question in the negative. One would like to hear from others on this point, and to know also what the mortuary statistics indicate. It is evident also that current medical literature does not now make the topic so prominent as it formerly did. It may be that other matters are deemed more important; for this is a time of extraordinary research, experiment, and innovation in all branches of medicine. How best to manage a case of infantile vomiting and diarrhea, can hardly expect recognition when compared with the great surgical operations. Even cures for consumption seem more attractive, although the reasons therefor are not such as to fairly obtrude into our intelligence for in the first place consumption cures do not cure, while nearly all cases of cholera infantum are curable, and are cured. Again, the life of a promising baby is just as valuable prospectively as that of a partially wrecked consumptive.

But apart from speculation, what is good treatment in cholera infantum?

In these days, thanks to Hahnemann, first and foremost hygiene is the first essential in the management of this disease. It is a disease of hot weather, of crowded rooms, of foul air, of bad feeding, and ignorant management. Perhaps not wholly so. It may occur under conditions apparently most favorable. But as a rule, some one of these factors will be found present. If no other, then artificial food, at least.

Now all of these conditions must be corrected and counteracted so far as possible. For a child of a crowded back street, a daily trip to the parks or lake shore, or removal to the country, and fresh cow's milk, will do wonders in many cases. Some times a few meals of breast milk, displacing an artificial diet, will recall the little one almost from its coffin. This resource is imperatively demanded in those chronic cases which have entered upon the dismal course of marasmus.

It is not impossible to cure a case of this disease even while continuing the use of some of the artificial foods. But no amount of experience has been able to remove from my mind a profound distrust of the whole pretentious array of them. When a child lives or recovers during their use, it is, it seems to me, rather in spite of them than on account of them.

In very acute cases, where the characteristics are high fever, unquenchable thirst, and persistent vomiting of everything, with or without diarrhea, *Aconite, Ipecac* and ice-cold rice-water are of immense value. The cold drink may be continued, notwithstanding the vomiting. It cools and rinses out the stomach, and the vomiting of it is easier than empty retching.

Many remedies may have to be consulted during the progress of several cases, or even of a single case. But it is among the good old polychrests that our best resources are to be found. *Bryonia, Arsenicum,* with their opposite thirst indications, *Chamomilla, Stibium, Belladonna* (with its inordinate heat of the whole body), *Iris versicolor,* and, in the highest temperature, *Veratrum viride,* 2x, drop doses, half hourly, will bring down the fever without injury.

In threatened, or actual convulsions, *Belladonna* or *Cuprum* are worth millions.

Veratrum album, when the bowels pour out green water, and the sinking exhaustion is extreme; if cold sweat is added, *Camphor.*

I believe I have mentioned the chief remedies for the acute stages. But for milder phases, which are apt to be of longer duration, we need to consult our Materia Medica more extensively. Drugging will not do at all for these tender patients. No opiates in any form. They suppress the action of the system in its efforts to expel zymotic elements, and so for a time hide the inner mischief. But the result is that the nerve centers, even those of the brain, are poisoned, and the almost necessarily fatal form of cholera infantum—meningitis—is inaugurated.

I may mention here, before closing, two or three most valuable foods, which may be used when convalescence begins, that is, in cases where natural food cannot be obtained, or in older infants who have been weaned. These foods are mutton broth, made with rice, rice-flour or barley, salt codfish broth, made from properly freshened fish. But the fish must be codfish without guile, not haddock, hake or pollock. The latter are usually found in neat little bundles like kindling wood, or in similar pieces put up in nice looking boxes with glass covers. Suffice it to say that real codfish needs no disguise, and never is disguised. It has delicacy of flavor, is easy of digestion, tender and flakey, white and succulent, and full of nutrition—all of which virtues the spurious article lacks.

In the treatment of this disease I know of no one

book so serviceable as "Bell's Therapeutics of Diarrhea." The indications and characteristics of drugs there given are ideally correct. If we had similar monographs on all diseases we should be possessed of an ideal Materia Medica and therapeutics.

No man is to be blamed for falling occasionally into unbelief in Materia Medica. But let such a one study and apply the above named work in diarrhea and allied diseases, and instantly his faith will revive and will endure.

SELECTED SUMMER COMPLAINTLETS.

Very watery stools are always a very bad sign.—Donkin.

Child falls asleep on the vessel as soon as the tenesmus ceases.—Bell.

The summer diarrheas of children are due to toxicogenic bacteria.—Vaughan.

The most suitable culture medium for growth of the diarrhea-producing bacteria is milk.—Vaughan.

Tubercular diarrhea is as a rule chronic; in an enteric form initial diarrhea is but rarely prominent. —Donkin.

In selecting *Calcarea carb.* the stool is often of less importance than the person and the concomitant symptoms.—Bell.

That there is a close connection between hot weather and the summer diarrhea of children does not admit of a doubt.—Ashby & Wright.

Unless the infant be at the breast all milk or milk foods should be stopped and barley water with white of egg be substituted.—Ashby & Wright.

Convulsions may accompany the onset of the disease in some cases marked by much pyrexia, and are frequent just before the fatal end.—Donkin.

Absolute cleanliness should be observed, all soiled linen being quickly removed and daily or more frequent tepid bathing is advisable.—Donkin.

Broncho-pneumonia and collapse of the lung often follow or combine with the abdominal symptoms and may be the immediate cause of death.—Donkin.

With persistent pyrexia and distended and tender belly, inflammation or ulceration of the intestines, especially of the colon, may be suspected.—Donkin.

Vaughan, in the American Text Book of Diseases of Children, considers cholera infantum, choleriform diarrhea and acute milk infection synonymous terms.

Acute attacks of diarrhea are specially liable to be developed again without discoverable dietetic errors in infants who are the subjects of rickets or syphilis. —Donkin.

Stomach washing should be employed in cases when vomiting is obstinate, and irrigation of the lower bowel will often be found very useful in acute cases.—Donkin.

No infant at the breast should be weaned during the hot weather, and if diarrhea makes its appearance it should if possible be returned to the breast. Ashby & Wright.

While it is doubtful if sour or contaminated milk can be the constant cause, yet it seems probable that the milk supply has in some epidemics been at fault. —Ashby & Wright.

Prognosis is worst with a very high temperature and in very young infants with a history of untoward surroundings and of previous disease, especially diarrhea.—Donkin.

The contents of the intestines in the so-called summer diarrhea of infancy swarm with bacteria of many species and some of these produce most powerful poisons.—Vaughan.

I would record the warning not to regard bloody stools, even if frequent and plentiful, which last but a few days as necessarily or usually the result of ulceration.—Donkin.

The treatment of cases of acute and sub-acute infantile diarrhea consists mainly in removing or antagonizing its main cause by the institution of proper diet.—Donkin.

The body has a filthy smell even after a bath; the skin is dirty and greasy looking; there is great debility; profuse perspiration at the least exertion and at night. *Psorinum.*—Bell.

The diapers from children suffering from milk infection should always be disinfected, and, what is of more importance, the nurse's hands should be disinfected after she has removed the diaper.—Vaughan.

On the whole, it may be said in spite of the many fatal cases I have seen without fever, that the persistently normal temperature, other things being equal, contributes to a favorable prognosis.—Donkin.

In cholera infantum the discharges are frequent, watery, even bloody. Child is greatly reduced, falls into a stupor, red-faced, dilated pupils, rolling of the head, and soft, full, flowing pulse. *Ferrum phos.*— Boericke & Dewey.

China has a very strong resemblance to *Carbo veg.* Its stool is watery, undigested, profuse, frothy, involuntary, putrid, cadaverous, corrosive. It may be blackish, brownish, whitish, greening, bloody, or yellow mucous.—Bell.

The toxicogenic germs grow and multiply in the milk both before and after it has been taken into the alimentary canal of the child, and elaborate chemical poisons which induce the diarrhea and other untoward symptoms.—Vaughan.

Sudden and great sinking of strength; vomiting and diarrhea suddenly ceases and the child lies almost unconscious, with blue face and hands, cold tongue, icy coldness of the body and hoarse voice, cold sweat on the face, *Camphor.*—Bell.

Acute intestinal catarrh must always rank as a serious disease not only from its tendency to prove fatal during the attack itself, but because it so frequently passes on into the sub-acute or chronic forms to be succeded by atrophy.—Ashby & Wright.

Bottle-fed infants with diarrhea should have all milk more diluted than usual, or a mixture of cream and barley water should be substituted, such as cream one-half ounce, barley water three ounces, white sugar one teaspoonful.—Ashby & Wright.

In severer cases, where the stool is frequent, the blandest and most unirritating food must be given, such as arrowroot water two ounces, whey two ounces, white sugar one teaspoonful; or, barley water ten ounces, white of egg one ounce, white sugar one or two teaspoonfuls. Either of these may be given out of the bottle every few hours, and in amounts according to the age.—Ashby & Wright.

In the treatment of cholera infantum, Vaughan, American Text Book Diseases of Children, says the first thing to be done is to positively forbid the further administration of the poison. In italics he proclaims that not a drop of milk should be given. The prohibition of milk must be absolute. Sterilized milk is not to be thought of and even the breast of the mother or wet nurse must be denied.

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SUMMER COMPLAINTS OF CHILDREN.

This being the time of year when the summer complaints of children are likely to be more or less prevalent, the country over, we have thought it might be helpful to the readers of the Medical Century to undertake to present them with a Summer Complaint number made up of a series of contributions on this subject from a good number of general practitioners from every section, and the present out-of-the-usual-order issue is the result.

As will be seen we have been able in a very short while to gather together off-hand contributions from nearly every part of the country. It was not the intention to ask for text-book essays on this topic, but to invite a number of short, practical, impromptu contributions. In them will be found much that is practical and helpful, and, perhaps, in them also will be found something to criticise and discuss, thereby bringing out the opinions and ideas of others than these contributors. The subject is full of interest and we fain would express the hope that from the presentation of it in this issue there may come to our readers much that is helpful in the field of practice.

It will be noticed that nearly every writer whose experience has been given dwells upon, as of first importance, the subject of hygiene, general and personal. This will be very gratifying to those of us who believe in the future of preventive medicine. Sanitary science is a department of our art altogether too much neglected, and if discussions like that on this disorder but awaken the practitioner to the necessity for greater attention toprophylaxis much good good will be certain to accrue. Drs. Leavitt and Grosvenor strike the keynote when they say in substance that the treatment of cholera infantum should begin at the birth of the baby. Mothers should not be encouraged in the unmotherly habit of weaning their young on every and any pretext. Bottle-fed babies have a much harder struggle for their lives than do those who are nurtured *per viam naturales*. It may be true that occasionally we meet with an instance where humanity demands early weaning. But it is equally true that the average society mother is only too glad, as a rule, to find an excuse, or a semblance of an excuse, for weaning her offspring. It is so vulgar, don't you know, to have a baby tugging at the breast. Almost any sort of an excuse is offered, and, unfortunately, thoughtlessly no doubt, in many cases the attending physician falls into the pitfall prepared for him and consents to or advises the weaning of the little ones, and this means death to them by the thousands. The maternal is nature's way, and difficult indeed is it in this matter to improve upon her methods in this matter.

Fresh air is the burden of the song of several of our contributors, and a sweet song it is, too. It means life and health and strength to many a helpless infant. Drs. Orme, Mayer and McElwee, especially, strike this note with emphasis. What better testimony could we hope to gather than that offered by Dr. Mayer? Every word he says about the unsanitary condition of New Orleans is true, and still the fact stares us in the face that the death rate from diarrheal diseases in that city is astonishingly low. The whyfore of it lies in his explanation: The people live out of doors. Dr. Orme, who also lives in the South, where more of an out door life is possible than in other parts of the country, speaks equally strongly in favor of fresh air, even if the little one is kept out day and night. Of course this is not possible in more northern climes, but while we may have to avoid somewhat the changes from day to night, it is yet a fact that the more we can keep infants in the fresh air the healthier they will be. Drs. McElwee and Gutherz, of St. Louis, than which city there is not a more sultry one in this country, dwell upon this thought, and the former cites instances wherein he had little patients kept out of doors day and night till they were perfectly well. Fresh air is a *sine qua non* in the management of the summer bowel disorders of infants, and many a little sufferer has been saved by throwing open the doors and windows of a stuffy house, by taking him out in the parks, off on the lake or river, out in the shade in the front or back yard, as suggested by Dr. Horner, out in the country or off in some suburb where the only important change in climate is local in character, a change from the heated and fouler air of the city or the individual house to the fresher air that nature is so willing to plentifully supply if but given half a chance.

In the matter of clothing, too, there seems to be quite a unanimity of opinion. Drs. Monroe and Bailey, especially, advise keeping the baby warm and cool at the same time ; warm over the abdomen and cool generally. Dr. Monroe's crocheted shirt and Dr. Bailey's flannel belly band amount to the same thing. The testimony given by Dr. Bailey has been corroborated in our personal experience many a time, and nothing better can be done as a local expedient

in child life, or adult life either, in diarrheal disorders, than to keep the abdomen well protected. Abdominal shock from the taking of cold, that is from the suppression of perspiration, visible or unconscious, over the abdomen by draughts of air is a prolific cause of diarrhea and this is best guarded against by woolen protection of some sort. The abdomen should be well though lightly protected, and the rest of the little human anatomy should be made just as cool and comfortable as it can be made in summer time. Humanity should be practiced with all children whether well or sick and it is not human to bundle a sick child in a surplusage of clothing, no matter how daintily it is made nor how much the nurse or mother may pride herself on the wardrobe of her charge.

Our contributors differ when they come to discuss the matter of drinks and the use of water. Several of them advise the use of little bits of ice, and one or two suggest the free use of ice water. This is rather new to us, and at first thought we cannot help expressing our doubts as to the wisdom of giving infants ice or ice water, especially when already suffering from gastro-intestinal catarrh. Dr. Orme is emphatic on this point, and Dr. McElwee agrees with him and goes further. These gentlemen doubtless know whereof they speak, but our experience is not theirs, or *vice versa*. It has been our habit to allow as plentifully as need be of cool water, water cooled by being placed near but not against or on ice. Not infrequently have we found mischief arising from even this mild use of cold water, and we have almost come to be a hot water fiend. Our experience leans decidedly toward the use of little sips of quite hot water in those cases characterized by vomiting or by very frequent movements of the bowels. In general atrophy or marasmus, where there is a decided waste of tissues, it would be inhuman to deny the patient water almost *ad libitum*. But without the advice of such a wise counsellor as Dr. Orme, and the expressed experience of such a contributor as Dr. McElwee, we should hesitate seriously before giving ice or ice water in choleraic diseases of infants.

Bathing is of prime importance, nearly all agreeing on this point and most of the contributors to this subject mentioning it. The little patients should be kept scrupulously clean. Of course, when exceedingly weak and exhausted, no one would recommend the daily bath, but the free use of water after each action of the bowels, the immediate removal and disinfection of all diapers soiled by fecal or urinary discharges, and plentiful use of cool, even cold, water about the child when fever is a prominent symptom, the application of cool cloths to the head when cerebral symptoms threaten or are present, no matter what their degree, are all actually demanded and mentioned by most writers whose articles are given. The use of the bowel and stomach douche is mentioned, and should be practiced more often than they are. It was our lot to at one time practice alongside of a Hydropathic physician and we are free to confess that he often saved cholera infantum patients whose cases seemed to us to be well nigh hopeless. The free flushing of the bowel after acrid discharges, or half finished stool, the copious washing of the stomach in cases marked by severe and exhaustive vomiting, and the general application of water all over the body and head, in a systematic and continuous treatment, is often productive of the greatest amount of good. Naturally there is a great waste of fluids from the system in all these cases, and if this waste can be compensated for in some systematic manner it cannot but be a helpful adjuvant in treatment.

The question of infantile feeding is the most important problem in this connection and, unfortunately, it is the one handled to the least satisfaction. Several of the contributors are directly at variance on this topic. Some feed little but very often. Others advise total suspension of food, and reliance upon drinks is recommended. Some think cow's milk, sterilized, the best substitute for breast milk, while others recommend various proprietary foods. Dr. Gutherz likes Bovinine. Dr. Allen likes hot water. Dr. Wright likes arrow root water, barley water, and the like. Dr. McElwee likes Savory & Moore's Panopeptine. Dr. Nottingham likes Revelenta. Dr. Wilson likes rich milk, etc. Of the authorities Vaughan, of the University of Michigan, considers cholera infantum an acute milk infection and taboos milk altogether, even the use of breast milk, considering sterilized milk absolute poison to the summer complaint baby. Mellin's Food is highly recommended by several of our contributors and Horlick's comes in for a share of praise. Bovinine meets with the approving smiles of some, and Dr. Leavitt likes Lacta Preparata. Dr. Wright also mentions the old fashioned wheat flour ball boiled till it is ready to crumble, "the kind our mothers used to make." Dr. Wilson feeds every four hours, some feed every two hours, and others, as already pointed out, give the stomach absolute rest. Dr. Bebee tells us how impossible it is to prescribe a diet that is suited to every case, but he does not help us out as much as we wish he did, that is, he is a little too general and does not individualize quite as much as he might have done. Perhaps he will kindly do this for us another time. The management of summer complaints would be an easy matter indeed did not this complex question confront us as a nightmare. But it does, nevertheless, and it is the utmost of dread that we, personally, experience when called to a case of infantile diarrhea in hot weather in the case of a bottle-fed baby.

In the case of very young infants whose cases are acute we have derived much satisfaction from the use of Bovinine, a few drops in a few teaspoonfuls of dilute cream, the base being barley water. If the

child is a little older, a few months of age, Mellin's Food with dilute cream has answered unusually well. Occasionally a case has been met with wherein Nestle's Milk Food has served us fairly well in sucklings, and Horlick's or Ridge's Foods have come in handily in children a little older. Sterilized milk is of value, beyond question, where the trouble is a simple diarrhea. But we have learned to eschew milk in acute cases of cholera infantum, or severe diarrhea in young children, preferring to rely upon the Bovinine and dilute cream or the dilute cream and barley water till the crisis is past.

After all, there is room at the top for the man or woman who knows very much very positively about infant feeding. "What is one's food is another's poison," and the trouble lies in the fact that while we are diligently trying to ascertain which is which our little patients are often slipping out of our fingers.

When it comes to the subject of medical treatment we are free to confess that all our contributors, or nearly all know more about it than we do. At least we are led to judge from the confidence with which most of them approach this subject that this is the case. We have not been exceedingly unfortunate in our handling of this class of cases. On the other hand, we have considered ourself rather better in this line of work than in some others. But we have met with a greater per cent of stubborn cases than Dr. McElwee's five per cent, and right often are we taxed to the utmost in attempting to handle the summer complaints of young children. When the grim monster really gets after one of the little darlings in earnest we have found him just about as hard to route as if he were attacking with his most dreaded weapon, diphtheria. To us cholera infantum is a most serious disease, one requiring consummate skill and a pretty good knowledge of Materia Medica as it relates to the constitutions of patients and to the disorders of their alimentary tracts. There is little field here for haphazzard prescribing, though we all indulge in it more or less. It may be well for us to indulge the suggestion that the Materia Medica is known to us all. But it isn't. It may be well, also, for such careful prescribers as Drs. Allen, Custis and Menninger to tell us to individualize our cases and fit the remedy to each. There are many of us who have difficulty in doing this, and we ask these good colleagues to help us by telling us just how to go about it and then give us some illustrative cases and suggestions that will enable us to know whether we are succeeding or not. For instance, in talking with a physician a day or two ago who is a most careful hunter in every instance for, not the similia, but the similimum, it was pointed out to us that two of the best acting remedies where "severe straining" at, during, or after stool, or all three, in more or less degree, is marked, are *Sulphur* and *Mercurius solubilis*. We have often given *Mercurius corrosivus* and *Podophyllum* and other remedies having this symptom, and prolapsus of the rectum, a synonymous symptom, but had not specially recalled the fact that these remedies are to be most promptly thought of in this connection. This is, doubtless, wholly our fault. But if those practitioners who are wont to individualize very closely will but give the readers of this journal a few pages monthly of this kind of individualizing, if they will but tell us what they find most helpful as a rule in this disease or that, and why they have been led to give it, they will sow some Materia Medica seed that will bring forth good fruit. Of course this is not intended for a lecture for these contributors, simply as suggestive of what medical journal readers and editors desire.

Off-hand contributions, informal thoughts, a few simple suggestions were what was asked for this time. We have a good lot of them and in it there are many practical hints. But in scientific application of remedies for this, that and the other condition attending cholera infantum there is a dearth of exact information. This can be and ought to be supplied, and it is our hope that some of our sharp shots will furnish us with a few exceedingly useful articles on this line of thought. We have had presented lots of good thoughts on the subject of hygiene—clothing, bathing, ventilation, primary diet—but are a little short in the matter of specific hints in the line of treatment and in careful differentiation in the matter of selection of infantile foods. A little more specificity in these fields is desired. This given and the effort of the Medical Century to present the practical workings of the profession in the treatment of the summer bowel disorders of children will have been attended with gratifying success. Don't tell us, then, to study the Materia Medica, but, rather, tell us what you have learned in studying it and in applying the knowledge in practice.

BACTERIAL DIAGNOSIS OF DIPHTHERIA.

Since it is not easily possible to overestimate the importance of early diagnosis in diphtheria the medical profession of Chicago will welcome the latest effort of the City Health Department in its attempt to intelligently serve the people by the introduction of the bacteriological method of making a diagnosis in suspected throat cases. Following the example set by New York and other eastern cities the city health office has established a sub-department whose duty it shall be to make such diagnosis in suspected cases. This involves the following practical points, which it will be well enough for the profession to understand: First, the preparation of the proper culture medium and its distribution to the profession; secondly, inoculation of tubes from patients, and their return to the department; thirdly, the cultivation and examination of the tubes in the laboratory of the department; fourthly, the rendering of reports to the physician submitting the specimen and to the sanitary

officer of the district from which it comes. The department has prepared these tubes and encased them in wooden boxes, for safety, accompanying them with the necessary blanks of instructions as to how to proceed in conformity with the rules established by the health officer. These may be obtained by application at Room No. 4, City Hall.

The culture media used in this work is the blood-serum of Lœffler, and the urine-agar of Schlœffer, upon which the diphtheria bacillus grows almost as readily as upon the blood-serum. The bacilli of this disease will grow within twenty-four hours, or much earlier than the bacteria of pus, or other bacteria, and in this way an accurate differential diagnosis is almost if not quite certain in every instance before the disease has had opportunity to develop to alarming extent; that is, if the specimen is obtained early.

Treatments of diphtheria, whether based upon the strictly constitutional plan, the strictly local plan, or upon a combination of both, are made far more certain and scientific when the diagnosis is established beyond peradventure of doubt. This is to be accomplished only upon the bacteriological information to be obtained by microscopical and laboratory tests, and, therefore, the profession of Chicago should hail with satisfaction the inauguration of this new feature in the work of the health office. It but remains for us to avail ourselves of the facilities offered to be made masters of the situation in so far as diagnosis is concerned, and to be strengthened and supported thereby in the treatment and general management of this dread disease.

As soon as practicable the health office should establish local bacteriological depots or offices in convenient parts of the city, as has been done elsewhere.

CHICAGO'S NEW SOCIETY.

The enthusiasm manifested by the profession of this city in the organization of the new Homeopathic Medical Society of Chicago must be very gratifying to its membership. For many years past Chicago has had a number of small associations, each representing a college or hospital or sectional interest, each doing good work in its way, but no general association, representing the entire profession and its multitude of interests, has had existence. That there is a field, an actual need for such an organization in every large city in this country should go without the saying. There are numerous substantial interests of the profession, as proper representation in the hospitals, asylums, prisons, sanitary organizations, etc., of all great cities that are sure to go unassigned and unenjoyed because of lack of organic union. In Chicago the profession is accounted unusually fortunate by its colleagues all over the country, but the fact remains that not a tithing of what properly belongs to us in this great city and this great county and this great state is ours and, largely, we believe, because there has been no united effort, no concerted action, no authoritative body to look after our rights and privileges.

Homeopathy in Chicago is entitled to representation in every medical institution, public in nature, in this city and county. There is no good reason why we should be content with representation in Cook County Hospital only. And with the splendid record we have made there it should be a comparatively easy matter for us to secure the opening of the doors to other institutions, that we may have our just rights and that the inmates thereof shall have the benefits of Homeopathy and the effect of its presence in the medical management of them all. Surely, a thoroughly representative society, a society embracing the whole profession of Chicago, for no one thoroughly loyal to Homeopathy's interests will remain out of this kind of an association, cannot fail to accomplish really wonderful achievements in this direction in the course of time. Is it not a duty we owe ourselves, our colleagues, our profession, to unite with the new association, and by attendance upon its deliberations lend our united strength toward the securement of better things than are now ours?

And then, the professional advantages of membership in a great Chicago society! These should be, and we believe they will be, manifold. Here will come together the strong men of the profession, the teachers in all our colleges, the practitioners of every part of the city, the specialists in every department of professional work. The brightest thoughts, the latest ideas, the ripest experiences of the really great profession of this great metropolis will there be spread before us of lesser years, of more meagre experience, of more limited experiences, of more general work. We will learn from the wise men, and, perhaps, they may, in the course of time, learn from us, all being bettered by the interchange of thoughts and experiences. Surely, a society representing the nearly six hundred doctors of our branch of the profession in Chicago and suburbs ought to make a mighty army for good, medico-politically, professionally, socially.

Let us, then, come together once a month and do battle for our science. Let us come together once a month and learn of each other. Let us come together once a month and become acquainted with each other. Many of the asperities of the profession will be worn away in this communion and we will all be better doctors, better citizens, better neighbors and better friends for the communion. The next meeting occurs the first Monday in September, and every Homeopathic practitioner, great and small, old and young, male and female in Chicago and vicinity should be present and become identified with this commendable movement.

Drs. C. H. Vilas and Jos. Watry, Chicago, are spending their summer vacation in Europe.

Editor's Table.

Dr. J. S. Mitchell is summering at Nantuckett.

Dr. J. W. Streeter has returned from his summer outing in Europe.

Dr. F. W. Pease has removed from Sutter, Ill., to Warsaw, same state.

Dr. C. W. Day, registrar of Hering College, is off for an outing at Ocean Grove, N. J.

Dr. P. R. Watts, formerly of Stafford Springs, Conn., has removed to Sacramento, Cal.

The firm of Drs. Hoffman & Brown, of Orleans, Neb., has been dissolved by mutual consent.

Drs. A. K. Crawford and W. A. Dunn are on a visit with their families on the coast of Maine.

Dr. A. H. Wales, Chicago, is enjoying an outing of two weeks at his father's home, Lanark, Illinois.

Dr. Edward J. Morgan, Ithaca, New York, died at the age of sixty-nine years on the twelfth of June.

Dr. Mary K. Mack, a recent graduate of Hering Medical College is located at 312 E. 40th St., Chicago.

Dr. J. A. Lenfesty, recently house surgeon of the Homeopathic Hospital at Ann Arbor, has located at Mt. Clemens, Mich.

The Hahnemann Medical College and Hospital of Chicago is out with its 35th annual announcement. The session opens September 11, 1894.

The forty-third semi-annual meeting of the New York State Homeopathic Medical Society will be held at Middletown, September 25 and 26.

Dr. J. H. McClelland and family passed through Chicago on their way home after an extended outing in the West, on Saturday, the 4th of this month.

Dr. A. K. Crawford is recuperating from a severe attack of gastro-intestinal disorder, now quite prevalent in the neighborhood of Chicago, at Casco Bay, Maine.

The New York College and Hospital, Homeopathic, will begin its thirty-fifth annual session on the second of October, continuing the session seven months.

Dr. B. Banton died at Bangor, Me., on the twenty-seventh of July at the age of sixty-six years. He had practised Homeopathy twenty-five years in Waterloo, Ia.

We have a most excellent lot of papers on a variety of subjects in hand for the next number of this journal. It will be an unusually interesting and instructive one.

Drs. Pratt, Holbrook, Costain and wife, all of the Lincoln Park Sanitarium, and a number of the Sanitarium's bright nurses enjoyed a brief outing across the lake last week.

The CENTURY has no word from the National Homeopathic Medical College, Chicago, bearing upon its announcement for the coming term but is expecting its reception daily.

Dr. J. P. Dake is spending the summer on the Pacific Coast. His son, Walter M. Dake, is summering at Virginia Beach. Dr. W. C. is the stay-at-home member of the firm this season.

Among the recent new subscribers to the MEDICAL CENTURY is Dr. B. C. Phookan, Jorhat, Assam, India. And thus this journal is gradually wending its way to the furthermost ends of the earth.

Dr. E. A. Darby and Dr. Margaret Darby, of Mt. Vernon, O., sailed August 8th, steamer Majestic, for Europe, to spend several months there in special study. Dr. Margaret Darby will devote her time to women's diseases, while Dr. E. A. Darby will take the eye and ear.

The vaccination committee appointed at the Quincy meeting of the Illinois State Homeopathic Medical Society has done nothing in the way of definite work as yet, but will have a comprehensive report at the earliest practical moment. It takes time to work up matters of this character.

Dr. and Mrs. Frank Kraft and son spent a day on the banks of the Great Salt Lake after adjournment at Denver. Of course they took in all the enjoyable features of the trip out and back. Dr. Kraft was entitled to a good rest after his arduous labors as official stenographer of the meeting.

The legislative committee of the new Homeopathic Medical Society of Chicago has appointed a general sub-committee of one physician for each ward of the city, and upon the reconvening of the city council in September will have an active campaign organized for the prosecution of Homeopathy's interests.

The British Homeopathic Congress held a very successful session recently at London. Dr. E. Monson Madden, of Bromley, was elected president for the ensuing term. Dr. Ramsbotham was elected vice president, and Dr. D. Dyce Brown was continued as secretary, though desiring to relinquish the office.

Chicago Homeopathic Medical College has issued its usual neat and attractive annual announcement. Among the new inducements this solid and prosperous college offers its patrons is its new laboratory and hospital building, now about completed. No important changes are made in its faculty this year.

The Essentials of the Diseases of the Eye, Nose and Throat, is the title of W. D. Saunders' quiz compend No. 14, price of which is $1.00. It is a very interesting and instructive little work of 290 pages and will be found very helpful to students who are following the study of the diseases contained in this volume.

The *Medical Arena*, Kansas City, is growing to be one of the most readable and newsy journals coming to this office. Under the editorship of Drs. Delap and Foster it is forging to the front as a creditable representative of Homeopathy in its locality. Its big brother, the MEDICAL CENTURY, wishes it every conceivable success.

The Homeopathic Medical Society of the State of Pennsylvania will hold its next annual meeting in September 18, 19 and 20, at Philadelphia. C. S. Middleton, M. D., that city, is president and Dr. J. Richey Horner, Allegheney, is secretary. The Pennsylvania Society is one of the most prosperous and hard working societies of this country and its meetings are said to be among the best medical meetings that are held.

The *Journal of Orificial Surgery* sticks more closely to its text than any special journal we know of. Its table of contents offers nothing but orificial surgery, but plenty of that and right good reading

some of it is, too. Dr. Pratt and collaborators are making a useful and practical periodical of the orificial journal.

The MEDICAL CENTURY is in receipt of a valued letter from Dr. Carl Bojanus, Samara, Russia, under date June 28th-16th, from which it is learned that the good old doctor and his family are in the full enjoyment of excellent health. They very much regret their inability to attend the Denver meeting of the American Institute.

The *North American Journal of Homeopathy* for August contains a complimentary advance notice of the forth-coming Homeopathic Text-book of Surgery, closing with the pertinent suggestion that there is no reason why with such a corps of authors as it has this work should not equal or excel any similar work now before the profession.

Dr. and Mrs. S. S. Salisbury, of Los Angeles, were so interrupted by the strike in California that it was necessary for them to adopt a very circuitous route in order to reach heme. Having traveled part of the way by rail from San Francisco toward Los Angeles they were compelled to go by stage for fifty miles to Santa Barbara and from there by boat.

Hahnemann Medical College, Chicago, has just issued from the press an attractive and completely descriptive annual announcement. Their new hospital, one of the largest in the West, is nearly enough completed to justify the announcement that it will be used this year, and students attending this institution will find the hospital facilities greatly increased over former years.

Hering College's third annual announcement is now running through the press. It has been delayed owing to the efforts of the college officials to secure their new and commodious college and hospital building. This has been done, as announced in the CENTURY for August 1st, and the announcement will be in the mail in a very few days. The session will begin October 1st.

The Cleveland University of Medicine, formerly the Cleveland Homeopathic Hospital College, has issued an exceedingly attractive annual catalogue. There are no very important changes in the faculty for the coming season. The session of 1894-5 will begin on Wednesday, September 26th. This institution has decided upon a post-graduate course in the spring, beginning April 2d and continuing two weeks.

The *Century Magazine*, mid-summer number, contains an interesting article on Dr. Morton's discovery of Anesthesia, by Mr. E. L. Snell, and in *The Forum* for July Dr. George F. Shrady, editor of the *Medical Record*, tells its readers of the progress of surgery in America. The lay readers of the standard magazines of to-day are getting a liberal allowance of legitimate medical and surgical information, greatly to the credit of the periodic literature of these latter days of the nineteenth century.

Dr. T. E. Linn, Asheville, has issued a neat descriptive review of Asheville as a health resort, that will be found advantageous by those who have patients wishing to spend the winter in that healthful section. Asheville is a delightful spot, one of the most attractive of the South's numerous winter resorts, and Dr. Linn's pamphlet contains much information that the profession needs in determining its adaptability to individual cases.

Hahnemann Medical College and Hospital, Philadelphia, has just issued its exceedingly attractive announcement for the session of 1894-95, the most profusely and attractively illustrated of all the announcements received. Old Hahnemann is a well equipped institution, and stands foremost among our colleges. Her record is an enviable one, our English and Boston friends to the contrary notwithstanding, and the student who attends her instruction and wins her diploma is fit subject for congratulation.

The *American Homeopathist* for August 1, contains some Odontology paragraphs that afford interesting reading. Dr. Kraft is parhaps the leading paragraphist of the Homeopathic editorial corps, and as a rule he covers the whole ground when he takes up a subject. His journal's motto, "Hew to the line, let the chips fall where they may," is pretty well lived up to, even though sometimes he seems to cross over the line a little and "cut to the quick." A medical journal that has no spice is dry reading.

Dr. T. G. Vawdrey, Plymouth, England, writes some very complimentary things of the CENTURY in a letter to the editor, among others expressing the hope that this journal will be issued next year as a weekly. It is not impossible that at the present rate of growth in patronage this may be accomplished. If the strike and the dull times and our Grover and the sugar trust and the tariff Congress would but quiet down between now and the first of January next the WEEKLY MEDICAL CENTURY would be easily possible.

Boston University School of Medicine, of which the only Dr. I. T. Talbot is dean, is out with its usual handsome and practical announcement, this the twenty-second, telling of the advantages of this school for the ensuing year. It is an acknowledged leader among our medical colleges, and for thoroughness of work and completeness in all departments has no superiors and not many equals. The term begins Thursday, October 11th and continues till June 5, 1895. Students desirous of attending a university medical college can make no mistake by entering at Boston

The Hahnemann Hospital, Chicago, is completed and the furnishings are being put in place. The trustees are furnishing the commissariat department, laundry and offices, while the faculty and their friends are doing the same for the wards and private rooms. The total bed room for patients in the new hospital is 200, of which 40 are in private rooms; these rooms are open to the profession for the care and treatment of their patients, thus adding very materially to the opportunities of the profession in Chicago. The formal opening will take place co-incidently with the opening of the college, September 11, 1894. The actual opening is set for August 15.

Pulte Medical College, Cincinnati, is out with her twenty-third annual announcement. Pulte is a modest college, not over pretentious in the wording of her claims to attention, but she has turned out many of the brightest and foremost of the younger members of the profession, and is capable of most excellent work. Her advantages will be measurably increased now that the Hooper Homeopathic Hospital is an assured fact, and with this munificent gift of a hundred thousand dollars for this purpose Cincinnati will surely become more of a Homeopathic medical center than ever before. Pulte College will bear investigation every time. Her record is stainless and her work speaks for itself.

In a recent letter from First Vice President-elect Custis, of Washington, we are informed that the old school forces in the Capital city have introduced a bill in Congress to regulate the practice of medicine, with the understanding that the Homeopathic Society is to offer an amendment while it is in committee. The CENTURY is promised a copy of the bill, and when it comes it will make it public for the information of our profession. It is not impossible that it will be the desire of the Washington physicians to have the profession all over the country insist that their representatives in Congress shall make this bill as acceptable to us as it is to the old school or bring about its defeat. The time has gone by for juggling medical legislation.

Dr. Florence Saltonstall, San Francisco, one of the handsome women forming the MEDICAL CENTURY'S galaxy of women physicians in our June 15th issue, is out with a very neat reprint of a paper read before the California State Homeopathic Medical Society in May, detailing sixteen cases of vaginal hysterectomy without a death, performed by her. So far as we are aware Dr. Saltonstall is the first lady practitioner in our school who has made such an admirable record in surgery, if not, indeed, the first lady practitioner of any school to thus cover herself with the credit of being a first class operative gynecologist. Even Pean, Tait, our J. M. Lee, Pratt and others would consider sixteen successive successful cases an exceedingly good record. We congratulate Dr. Saltonstall upon her skill and ability in this line of professional work. Women physicians are getting to be quite numerous the country over, but women surgeons are not plentiful.

The *Albany Journal*, Albany, N. Y., for July 14th, announces the effecting of a formal organization of a board of managers of the New Homeopathic Hospital for the Insane at Collins Farm, N. Y., July 13th by the election of Dr. Wm. Tod Helmuth president, Dr. H. M. Paine, of Albany, secretary and Mr. S. Louis Soule, of Collins, treasurer. The managers are reported to be very much pleased with the superior advantages of the property set aside by the state for this new asylum and are to at once inaugurate a series of improvements which will make it one of the most desirable hospital properties in New York. We shall expect to hear from good Dr. Paine of most excellent and satisfactory results in this new field of labor. He is just the man for the secretaryship of the board and it may be predicted with absolute certainty that it will not be many years before Homeopathy will have the benefit of a system of very carefully compiled statistics relating to insane asylums and results of the different methods of treatment. In this class of work Dr. Paine has no superior in the Homeopathic profession.

The Denver profession, stimulated to action last year by the adoption of their city as the meeting place for the 1894 session of the American Institute, determined upon the organization of a Homeopathic medical college, and now, thoroughly enthused by the great success attending their efforts in behalf of the Institute, have made themselves ready for work and are out with their advertising for their first course of lectures, to begin October 1st. The officers of the college are Dr. S. S. Smythe, dean, Dr. E. F. Storke, registrar, and Dr. S. S. Kehr, secretary. With the native ability possessed by the Denver profession, coupled with their enthusiasm and sound business judgment there should be no doubt of the complete success of this latest addition to the medical colleges of our school. The West is a great mission field, and we shall look for most excellent results in the commendable efforts of our colleagues to properly educate the young men and women of the Rocky Mountain district in Homeopathy and general medicine and surgery.

A point for the legislative committee of the new Homeopathic Medical Society of Chicago! In issuing its circular letter on the Bacteriological Diagnosis of Diphtheria the City Health Department proclaims that it has issued a set of directions in blank form accompanying wooden boxes containing culture material, throat swabs, etc., the directions accompanying each box "being those presented to the Chicago Medical Society, July 16th, 1894." Just why the City Health Department owes its allegiance to the Chicago Medical Society we fail to understand. It may be, and doubtless is, eminently proper that as the recognized association of the old school of this city the Health Department should keep this society informed in regard to its actions in matters of this character; but why it should communicate exclusively with that body we do not know. Perhaps the Health Department has not been notified of the fact that there are other medical societies in this city. If this be the case, we have no doubt that Secretary Halbert will take pleasure in at once communicating the fact that the new Homeopathic society, representing nearly six hundred practicing physicians, is in active existence, and that its members stand ready to co-operate with the Health Department in all efforts pertaining to the good of the people. It is in matters of this character that a society like unto the one recently organized will prove helpful to our profession, by speaking for us and seeing that we are made an integral part of the medical profession of this great city.

A splendid piece of good fortune has befallen our colleagues in Cincinnati and the poor of that city in a magnificent bequest by the late William Hooper of the splendid sum of one hundred thousand dollars for the founding of a Homeopathic Hospital and Free Dispensary. Mr. Hooper made a large number of bequests, giving to the English Protestant Orphan Asylum $5,000, the Home for the Friendless $5,000, and like amounts to the Home for Incurables, Little Sisters of the Poor, Good Samaritan Hospital, Sisters of the Good Shepherd, English Catholic Orphan Asylum, Colored Orphan Asylum, Old Men's Home and Free Kindergartens of the city. He also gave $5,000 to the New Jerusalem Church of Cincinnati. The bequest in which we are especially interested, that of one hundred thousand dollars for a Homeopathic hospital, is to be held by trustees to be selected by the executors, and in the will it is suggested that our Prof. J. D. Buck be consulted in this connection.

Thus it will be seen that our friends in "Porkopolis" are to have what they have long needed, a Homeopathic Hospital. They are to be congratulated upon their exceeding good fortune, and the worthy poor of Cincinnati are also fit subjects for congratulation in the fact that they are at last to have a place wherein they may receive the better treatments of Homeopathy. The beneficence of Mr. Hooper is worthy of all commendation. Would that a thousand or two rich men would go and do likewise, even though they do not wait till they die for their charitable dispensations to be realized.